

MAY 08 2006

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FACSIMILE COVER SHEET

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Attn: Commissioner for Patents ART UNIT : 2876 Examiner: FRECH, Karl D. From: Pehr Jansson Reg. No. 35,759	
In regard to: Appl. No. : 09/945,123 Conf. No. : 2131 Applicant : Leydier, Robert Filing Date : 08/31/2001 Docket No. : 40.0048 Customer No. : 41754	This certificate applies to the following documents transmitted herewith: <ul style="list-style-type: none"> • Certificate of Transmission/Cover Sheet (this page) • Transmittal Letter SB-21 (1 page) • Petition for Ext. of Time SB-22 & Copy (2 pages) • Notice of Appeal & copy (2 pages) • Fee Transmittal SB/17 & copy (2 pages) • Credit Card Form 2038 & copy (2 pages)
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PTO/SB/21 (09-04)

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10

Application Number	09/945,123
Filing Date	08/31/2001
First Named Inventor	LEYDIER, Robert A.
Art Unit	2131
Examiner Name	JACKSON, Jenise E.
Attorney Docket Number	40.0048

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Anderson & Jansson, LLP		
Signature			
Printed name	Pehr Jansson		
Date	May 8, 2006	Reg. No.	35,759

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Signature		
Typed or printed name	Jennifer A. Beasley	Date

May 8, 2006

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PTO/SB/17 (12-04v2)

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<i>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		<i>Complete If Known</i>	
FEE TRANSMITTAL For FY 2005		Application Number	09/945,123
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	08/31/2001
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	LEYDIER, Robert A.
950.00		Examiner Name	JACKSON, Jenise E.
		Art Unit	2131
		Attorney Docket No.	40.0048

METHOD OF PAYMENT (check all that apply)

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Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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 under 37 CFR 1.16 and 1.17

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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fee Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>
				<u>Fee (\$)</u>
- 20 or HP =	x	=		50 25
HP = highest number of total claims paid for, if greater than 20.				200 100
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	360 180

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x		

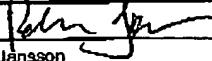
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal Fee and 2 mo. Ext of time fee

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SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 35,759	Telephone 512 372 8440
Name (Print/Type)	Petr Jansson		Date May 8, 2006

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
TOTAL AMOUNT OF PAYMENT	(\$)	950.00
Complete if Known		
Application Number	09/945,123	
Filing Date	08/31/2001	
First Named Inventor	LEYDIER, Robert A.	
Examiner Name	JACKSON, Jenise E.	
Art Unit	2131	
Attorney Docket No.	40.0048	

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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input type="checkbox"/> Credit any overpayments		
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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fee Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300.	150	500	250	200	100	
Design	200	100	100	50	130	65	
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2. EXCESS CLAIM FEESFee Description

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Each independent claim over 3 (including Reissues)

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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

<u>Independent Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

Small EntityFee (\$)Fee (\$)

50 25

200 100

360 180

Multiple Dependent ClaimsFee (\$)Fee Paid (\$)**3. APPLICATION SIZE FEE**

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 100 - / 50 = (round up to a whole number) * = Fee Paid (\$)**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Noice of Appeal Fee and 2 mo. End of time fee

950.00

<u>SUBMITTED BY</u>	<u>Signature</u>	<u>Registration No.</u>	<u>Telephone</u>
Signature	<i>Pehr Jansson</i>	(Attorney/Agent) 35,759	512 372 8440
Name (Print/Type)	Date May 8, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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